

TOWN OF POMFRET DEPARTMENT OF PUBLIC WORKS 5 HAVEN ROAD POMFRET CENTER, CT 06259	ROAD OPENING PERMIT APPLICATION Date of Application: / / Permit Approved: / / Permit Number: / /
Application forms must be filled out in entirety and returned and approved by Pomfret Road Foreman before any openings take place.	CLOSING APPROVED: / /
Name of Owner Address Town State Zip Phone	
Name of Contractor Address Town State Zip Phone	
Nearest Address to Road Opening (Street/Road Number/Name/Pole #)	
Permit Issued to: Address Town State Zip Phone	
Expected Start: / / Approximate Completion Date: / /	
Application is hereby made for a permit to open above mentioned road for the purpose of:	
Definite location (utility pole numbers, street intersections, other landmarks):	
SKETCH:	
I, the undersigned, agree to abide by any stipulations requested by the Town of Pomfret as a requirement for issuing this permit and working within the road limits of the Town of Pomfret.	
SIGNED _____ DATE _____	
BEFORE A PERMIT WILL BE ISSUED, THE OWNER OR CONTRACTOR WILL FURNISH THE TOWN OF POMFRET, CONNECTICUT WITH A CASH OR SURETY BOND IN THE AMOUNT OF \$3,500 AND A CERTIFICATE OF INSURANCE FOR BODILY INJURY LIABILITY AND PROPERTY DAMAGE AND THE TOWN OF POMFRET, CONNCECTICUT LISTED AS AN ADDITIONAL INSURED.	